

Healthy Workplace Funding Initiative Checklist

Place a check in each check box that applies. The first two check boxes must be checked for the application to be considered for approval.

USE THIS SECTION FOR ALL REQUESTS (BOTH ITEMS MUST BE CHECKED)

- ☐ Purchase/action supports one of the following focus areas:
 - Healthier eating/nutrition
 - Increasing physical activity
- ☐ The item/activity/program has input from employees

USE THIS SECTION FOR PROGRAMS, CLASSES, OR ACTIVITIES

- ☐ Program, class, or activity will not encroach on work time (that is, the class is on employee's time)—or— Program has management approval to be done during work time.
- ☐ There is research that shows the program, class, or activity is effective (please provide).
- ☐ The format of the program, class, or activity is appropriate. For example, a lecture-style presentation/class is used to communicate information and small, multi-session classes are used to teach a new skill.
- ☐ The program, class, or activity does not have associated products, such as books or food that are mandatory for the employee to purchase to enjoy the full benefit of the program, class, or activity.
- ☐ The vendor for the program, class, or activity must be chosen through the solicitation process with Procurement—or—chosen from the list of qualified programs, classes, or instructors (if available)

USE THIS SECTION FOR PURCHASE FOR INDIVIDUALS

- ☐ A majority of employees will benefit from purchase
- ☐ Purchase will not encroach on work time—or—management agrees to pay county employees for time

USE THIS SECTION FOR PURCHASE FOR GROUP

- ☐ A majority of employees will benefit from purchase.
- ☐ Purchase will not encroach on work time—or—management agrees to pay county employees for time.

Return completed checklists to: David Lawson, Manager, Executive Audit Services. MS: BOA-EX-3200. Notice of approval or elevation of the issue to the labor representatives will be within 5 working days of receipt.